

**Home Visiting Task Force
Sustainability Workgroup Meeting
April 7th, 2016
10:00-11:30am**

MINUTES

Participants: Liz Heneks (co-chair), Dan Harris, Penny Smith, Ralph Schubert, Ann Courter, Nancy Shier, Juana Ballesteros, Jay Young, Gail Nourse, Teresa Kelly (co-chair), Madiha Qureshi, Anna Potere

January 28th meeting minutes: the minutes were approved with no changes.

Impacts of Budget Impasse

- There is a small but growing movement from local health departments not to accept any state contracts in FY17, not just for home visiting but for everything driven by state general revenue funds.
- DHS-funded home visiting programs are closing rapidly, but PI programs funded through ISBE are able to stay open. This may impact the State's ability to meet the Maintenance of Effort requirement for MIECHV.
- PI programs that are currently funded will receive level funding in FY17 if the appropriation is the same as last year. Tony Smith has recommended a \$75M increase to the ECBG, which the Governor has supported in his budget. If there is additional funding to the ECBG in FY17, a percentage will go to PI and ISBE will offer a closed, competitive application so that currently funded PI programs will be able to compete for funding to build capacity to build a program with fidelity and in compliance with ISBE regulations, administrative code, and the PI compliance checklist.
- In FY18, ISBE will offer a full competitive application for any program that would like to apply for funding to implement a PI program, which will be released in the spring of 2017.

1115 Waiver

- The State is applying for an 1115 Medicaid waiver focused on behavioral health, which may include an opportunity for home visiting. This waiver must be overall cost neutral, meaning it may not be best option for home visiting. Therefore, the group continues to pursue a State Plan Amendment and scheduling a meeting with HFS.
- As a result of the Cross-Systems Collaboration for Children's Social-Emotional Development funded by the Alliance for Early Success and NASHP, there are a number of topics to discuss for Illinois, including Medicaid coverage not only for home visiting but also for IMH consultation.

Shriver Poverty Law Center Meeting

- Funding for Family Case Management is now included under the Beeks consent decree so funding is flowing to the agencies that provide those services. Shriver has reached out to the ACLU regarding including home visiting funding in the same decree and will continue to consider other legal avenues.
- Mark Valentine is identifying which home visiting programs might be serving DCFS wards who are pregnant and parenting. The goal is to find an example of a ward being served in order to make the point that wards need home visiting services, so those services should continue to receive state funding.

MIECHV Grant Updates

- FY16 Formula Grant:
 - The State was awarded \$8.6M in funding from April 1, 2016 through September 2018. The funding will expand direct services to seven new communities, and will enable funding for innovative projects such as the Home Visiting-Child Welfare Pilot, Home Visiting for Homeless Families Demonstration Project, the Universal Newborn Support System, and infant mental health consultation. It will also continue investments in training and professional development.

- Letters have not yet been sent out to each of the new communities. It is anticipated that contracts will not be issued until July 1.
- Competitive Grant:
 - There was an opportunity to apply for a 2016 grant, but it was determined that it would be better to prepare for another anticipated opportunity in 2017. The grant amount is likely to be approximately \$2M.
- Funding for Community Systems Development has ended, but each agency participating in MIECHV will receive \$4,000 to continue to work within the collaborations. The communities continue to be funded for and work on Coordinated Intake.

Wrap Up and Next Steps: The next meeting of the workgroup is June 16th, 2016.